

North Carolina Division of Medical Assistance  
North Carolina Medicaid and Health Choice  
Preferred Drug List (PDL) **DRAFT - SL2 RR**  
Generic products are considered preferred unless indicated  
Trial and failure of two preferred agents are required unless otherwise indicated  
ALL therapeutic classes are not included on the PDL  
Prior authorization list, criteria, and forms located at: [www.nctracks.nc.gov](http://www.nctracks.nc.gov)

### ALZHEIMER'S AGENTS

#### Preferred

Aricept® 5 mg, 10 mg

Aricept ODT®

donepezil tablets (generic for Aricept®)

Exelon® Capsule

Exelon® Patch

Namenda®

#### Non-Preferred

Aricept® Tablets 23mg

Cognex®

donepezil ODT (generic for Aricept® ODT)

donepezil tablets (generic for Aricept® Tablets)

Exelon® Solution

galantamine (generic for Razadyne®)

galantamine ER (generic for Razadyne ER®)

Namenda XR®

Razadyne®

Razadyne ER®

rivastigmine (generic for Exelon®)

### ANALGESICS

#### NSAIDS

#### Non-Selective

#### Preferred

diclofenac potassium (generic for Cataflam®)

diclofenac sodium (generic for Voltaren®)

diclofenac sodium ER (generic for Voltaren XR®)

etodolac (generic for Lodine®)

etodolac ER (generic for Lodine XL®)

flurbiprofen (generic for Ansaïd®)

ibuprofen (generic for Motrin®)

indomethacin (generic for Indocin®)

indomethacin ER (generic for Indocin SR®)

ketoprofen (generic for Orudis®)

ketoprofen ER (generic for Oruvail®)

ketorolac (generic for Toradol®)

meloxicam (generic for Mobic®)

nabumetone (generic for Relafen®)

naproxen (generic for Naprosyn®)

naproxen ec (generic for Naprosyn EC®)

naproxen sodium (generic for Anaprox®)

piroxicam (generic for Feldene®)

sulindac (generic for Clinoril®)

#### Non-Preferred

Anaprox®

Arthrotec®

Cataflam®

Daypro®

diclofenac sodium-misoprostol (generic for Arthrotec®)

diflunisal (generic for Dolobid®)

etodolac ER (generic for Lodine XL®)

Feldene®

fenoprofen (generic for Nalfon®)

Flanax®

Indocin®

indomethacin ER (generic for Indocin SR®)

ketoprofen ER (generic for Oruvail®)

meclofenamate (generic for Meclomen®)

mefenamic acid (generic for Ponstel®)

Mobic®

Nalfon®

Naprelan®

Naprosyn®

Naprosyn EC®

oxaprozin (generic for Daypro®)

Ponstel®

Sprix®

tolmetin (generic for Tolectin®)

Voltaren XR®

Zipsor®

#### Preferred

**Clinical criteria apply**

Celebrex®

#### Non-Preferred

Duexis®

Vimovo®

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ANALGESICS	
NARCOTIC ANALGESICS	
Long Acting	
Clinical criteria apply	

Preferred	Non-Preferred
fentanyl patch (generic for Duragesic®)	Avinza®
Kadian®	Butrans®
morphine sulfate ER (generic MS Contin®)	Duragesic®
<b>Opana ER®</b>	Embeda®
	Exalgo®
	morphine sulfate ER (generic for Kadian®)
	MS Contin®
	Nucynta ER®
	<b>Opana ER®</b>
	<b>oxycodone SA (generic for Oxycontin®)</b>
	Oxycontin®
	oxymorphone ER (generic for Opana ER®)

Orally Disintegrating / <u>Oral Spray</u> Schedule II Narcotics	
Clinical criteria apply	

Preferred	Non-Preferred
fentanyl citrate (generic for Actiq®)	Abstral®
	Actiq®
	Fentora®
	Onsolis®
	<b>Subsys®</b>

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ANALGESICS	
NARCOTIC ANALGESICS (Continued)	
Short Acting Schedule II Narcotics	
Clinical criteria apply	

Preferred	Non-Preferred
hydromorphone suppository (generic for Dilaudid® Suppository)	codeine
hydromorphone tablet (generic for Dilaudid® Tablet)	Demerol®
meperidine (generic for Demerol®)	Dilaudid®
morphine solution	Endodan®
morphine tablet	hydromorphone solution (generic for Dilaudid Solution®)
<u>oxycodone capsule (generic for OxyIR®)</u>	levorphanol (generic for Levo-Dromoran®)
<u>oxycodone concentrated solution (generic for Roxicodone® Intensol)</u>	Magnacet®
oxycodone solution (generic for Roxicodone® Solution)	morphine suppositories
oxycodone tablet (generic for Roxicodone® tablet)	Nucynta®
<u>oxycodone/acetaminophen capsules (generic for Tylox®)</u>	Opana®
oxycodone/acetaminophen tablets (generic for Percocet®)	Oxecta®
	<u>oxycodone capsule (generic for OxyIR®)</u>
	<u>oxycodone concentrated solution (generic for Roxicodone® Intensol)</u>
	oxycodone/aspirin (generic for Percodan®)
	oxycodone/ibuprofen (generic for Combunox®)
	<u>OxyIR®</u>
	oxymorphone (generic for Opana®)
	Percocet®
	Percodan®
	Primalev®
	Roxicet®
	Roxicodone®
	Tylox®
	<u>Xolox®</u>

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ANALGESICS	
NARCOTIC ANALGESICS (Continued)	
Short Acting Schedule III – IV Analgesic Combinations	

Preferred	Non-Preferred
codeine/acetaminophen (generic for Tylenol with Codeine®)	<u>butalbital, caffeine, APAP, with codeine (generic for Fiorcet with Codeine®)</u>
hydrocodone/acetaminophen (generic for Hycet®, Lorcet®, Lortab®, Norco®, Vicodin®)	butalbital compound with codeine (generic for Fiorinal with Codeine®)
hydrocodone/ibuprofen (generic for Ibudone®, Vicoprofen®)	butorphanol (generic for Stadol®)
pentazocine/acetaminophen (generic for Talacen®)	Capital with Codeine®
	carisoprodol compound with codeine (generic for Soma Compound with Codeine®)
	<u>Coeet®/Coeet-Plus®</u>
	dihydrocodeine/acetaminophen/caffeine (generic for Panlor SS®)
	<u>dihydrocodeine/aspirin/caffeine (generic for Syalgos-DC®)</u>
	<u>Fiorcet with Codeine®</u>
	<u>Fiorinal with Codeine®</u>
	Hycet®
	Ibudone®
	Lorcet®
	Lortab®
	<u>Maxidone®</u>
	Norco®
	pentazocine/naloxone (generic for Talwin NX®)
	Reprexain®
	Synalgos-DC®
	<u>Trezix®</u>
	Tylenol with Codeine®
	Vicodin®
	Vicoprofen®
	Xodol®
	Zamicet®
	Zolvit®
	Zydene®

TRAMADOL	
<b>Tramadol is an opioid agonist of the morphine-type and can be abused in a manner similar to other opioid agonists, legal or illicit.</b>	

Preferred	Non-Preferred
tramadol (generic for Ultram®)	Conzip®
tramadol/acetaminophen (generic for Ultracet®)	Ryzolt®
	Rybix ODT®
	tramadol ER (generic for Ryzolt®)
	tramadol ER (generic for Ultram ER®)
	Ultracet®
	Ultram®
	Ultram ER®

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ANTICONVULSANTS
CARBAMAZEPINE DERIVATIVES

<b>Preferred</b>	<b>Non-Preferred</b>
carbamazepine (generic for Tegretol® and Epitol®) carbamazepine ER (generic for Carbatrol®) carbamazepine XR (generic for Tegretol XR®) Carbatrol® Epitol® Equetro® oxcarbazepine (generic for Trileptal®) <u>Oxtellar XR</u> Tegretol® Tegretol XR® Trileptal®	

FIRST GENERATION
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<b>Preferred</b>	<b>Non-Preferred</b>
Celontin® Depakene® Depakote ® Depakote ER® Depakote Sprinkle® Dilantin® Dilantin® Infatab Dilantin-125® Suspension divalproex (generic for Depakote®) divalproex ER (generic for Depakote ER®) divalproex sprinkle capsule (generic for Depakote Sprinkle®) ethosuximide (generic for Zarontin®) felbamate (generic for Felbatol®) Felbatol® <del>Mebaral®</del> Mysoline tablet® Peganone® <u>phenobarbital</u> Phenytek® <u>phenytoin chewable tablets (generic for Dilantin® Infatab)</u> phenytoin extended capsules (generic for Dilantin®) phenytoin extended capsules (generic for Phenytek®) phenytoin suspension (generic for Dilantin-125®) Primidone® Stavzor® <u>valproate syrup</u> <del>Valproate®</del> valproic acid (generic for Depakene®) Zarontin®	

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ANTICONVULSANTS	
SECOND GENERATION	
Patients with seizure disorder are exempt and may use any second generation product.	
Preferred	Non-Preferred
clonazepam (generic for Klonopin®)	Banzel®
clonazepam ODT (generic for Klonopin Wafer®)	clonazepam ODT (generic for Klonopin Wafer®)
Diastat®	Diastat®
Diastat® Accudial	Diastat® Accudial
diazepam rectal (generic for Diastat®)	diazepam device rectal (generic for Diastat® Accudial)
gabapentin capsule (generic for Neurontin® Capsule)	diazepam rectal (generic for Diastat®)
gabapentin solution (generic for Neurontin® Solution)	gabapentin tablet (generic for Neurontin® Tablet)
Gabitril®	Gralise®
lamotrigine stater kits (generic for Lamictal® Stater Kits)	Keppra®
lamotrigine tablet (generic for Lamictal® Tablet)	Keppra XR®
levetiracetam (generic for Keppra®)	Klonopin®
levetiracetam ER (generic for Keppra XR®)	Lamictal®
topiramate (generic for Topamax®)	Lamictal Dose Pack®
zonisamide (generic for Zonegran®)	Lamictal ODT®
	Lamictal XR
	lamotrigine ER (generic for Lamictal® XR)
	lamotrigine stater kits (generic for Lamictal Dose Pack®)
	Lyrica®
	Neurontin®
	Onfi®
	Potiga®
	Sabril®
	tiagabine (generic for Gabril®)
	Topamax®
	Topamax Sprinkle®
	Vimpat®
	Zonegran®

ANTI-INFECTIVES-SYSTEMIC	
ANTIBIOTICS	
Cephalasporins and Related	
Preferred	Non-Preferred
amoxicillin/clavulanate (generic for Augmentin®)	Augmentin®
amoxicillin/clavulanate XR (generic for Augmentin® XR)	Augmentin® XR
Cedax®	cefaclor (generic for Ceclor®)
cefadroxil (generic for Duricef®)	cefaclor ER (generic for Ceclor CD®)
cefdinir (generic for Omnicef®)	Keflex®
cefditoren (generic for Spectracef®)	Spectracef®
cefepodoxime (generic for Vantin®)	Suprax® Chewable Tablet
cefprozil (generic for Cefzil®)	Suprax® Capsule
Ceftin®	
cefuroxime (generic for Ceftin®)	
cephalexin (generic for Keflex®)	
Suprax® Suspension	
Suprax® Tablet	

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ANTI-INFECTIVES-SYSTEMIC
ANTIBIOTICS (Continued)
Lincosamides and Oxazolidinones

<b>Preferred</b>	<b>Non-Preferred</b>
Cleocin® Granules clindamycin capsules (generic for Cleocin Capsules®) clindamycin solution (generic for Cleocin Granules®) Zyvox Suspension® Zyvox Tablet®	Cleocin Capsules® Cleocin Injection® clindamycin injection (generic for Cleocin Injection®) Lincocin® Synercid® Zyvox Injection®

Macrolides and Ketolides
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<b>Preferred</b>	<b>Non-Preferred</b>
azithromycin (generic for Zithromax®) clarithromycin (generic for Biaxin®) E.E.S.® Eryped® erythromycin base er capsule (generic for Ery-C®) erythromycin base filmtab erythromycin ethylsuccinate (generic for E.E.S®)	Biaxin® Biaxin XL® clarithromycin ER (generic for Biaxin XL®) Ery-Tab® Ketek® PCE® Zithromax ® Zmax®

Nitromidazoles
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<b>Preferred</b>	<b>Non-Preferred</b>
metronidazole tablet (generic for Flagyl®) <u>Vancocin®</u>	Alinia® Difcid® Flagyl ® Flagyl ER® metronidazole capsule (generic for Flagyl®) <u>Neo-Fradin®</u> Neomycin® Tindamax® <u>tindazole (generic for Tindamax®)</u> <u>Vancocin®</u> vancomycin (generic for Vancocin®) Xifaxan®

Quinolones
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<b>Preferred</b>	<b>Non-Preferred</b>
ciprofloxacin (generic for Cipro®) Cipro Suspension® levofloxacin tablet (generic for Levaquin®)	Avelox® Cipro Tablet® Cipro XR® ciprofloxacin ER (generic for Cipro XR®) Factive® Levaquin® levofloxacin solution (generic for Levaquin®) Noroxin® ofloxacin (generic for Floxin®)

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ANTI-INFECTIVES-SYSTEMIC	
ANTIBIOTICS (Continued)	
Tetracycline Derivatives	

**Preferred**

doxycycline hyclate IR (generic for Vibramycin® Capsule)  
minocycline capsules IR (generic for Minocin®)  
tetracycline (generic for Sumycin®)

**Non-Preferred**

**Clinical justification required and failure of doxycycline and minocycline.  
Solodyn ER limited to 12 week supply**

Adoxa®  
demeclocycline  
Doryx DR®  
doxycycline hyclate DR (generic for Doryx DR®)  
doxycycline monohydrate (generic for Monodox®)  
Dynacin®  
minocycline ER (generic for Solodyn ER®)  
minocycline tablet (generic for Dynacin®)  
Morgidox®  
Oracea®  
Solodyn ER®  
Vibramycin® Capsules

**Exemption for doxycycline liquid in patients < 12 years old**

doxycycline suspension (generic for Vibramycin Suspension®)  
Vibramycin® Suspension

ANTIFUNGALS	
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**Preferred**

fluconazole (generic for Diflucan®)  
griseofulvin suspension (generic for Grifulvin V®)  
Gris-Peg®  
ketoconazole (generic for Nizoral®)  
nystatin suspension (generic for Nilstat® Suspension)  
nystatin tablet (generic for Mycostatin®)  
terbinafine (generic for Lamisil® and Terbinex®)

**Non-Preferred**

Ancobon®  
clotrimazole (generic for Mycelex Troche®)  
Diflucan®  
flucytosine (generic for Ancobon®)  
Grifulvin V®  
griseofulvin micro tablets (generic for Grifulvin V®)  
griseofulvin ultramicorsize tablets (generic for Gris-Peg®)  
itraconazole (generic for Sporanox®)  
Lamisil®  
Noxafil®  
nystatin powder (generic for Nilstat® Oral Powder)  
Onmel®  
Oravig®  
Sporanox®  
Terbinex® Kit  
Vfend®  
voriconazole (generic for Vfend®)

ANTIVIRALS	
Hepatitis B Agents	

**Preferred**

Baraclude  
Epivir HBV  
Hepsera®  
Tyzeka®  
Viread®

**Non-Preferred**

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ANTI-INFECTIVES-SYSTEMIC	
ANTIVIRALS (Continued)	
Hepatitis C Agents	

Preferred	Non-Preferred
Copegus®	Infergen®
Pegasys Syringe®	Pegasys® Kit
Pegasys Proclic®	Pegasys vial®
PEG-Intron®	Rebetol®
PEG-Intron Redipen®	Ribasphere®
Ribapak®	
ribavirin	
<b>Clinical criteria apply</b>	
Incivek®	
Victrelis®	

Herpes Treatments	
Preferred	Non-Preferred
acyclovir (generic for Zovirax®)	Famvir®
famciclovir (generic for Famvir®)	Valtrex®
valacyclovir (generic for Valtrex®)	Zovirax®
	Lidovir®

Influenza	
Preferred	Non-Preferred
amantadine (generic for Symmetrel®)	Relenza®
rimantadine (generic for Flumadine®)	
Tamiflu®	

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BEHAVIORAL HEALTH	
ANTIDEPRESSANTS	
New Generation	

Preferred	Non-Preferred
Aplenzin® bupropion (generic for Wellbutrin®) bupropion SR (generic for Wellbutrin SR®) bupropion XL (generic for Wellbutrin XL®) <b>Desyrel®</b> Emsam® Forfivo XL® maprotiline (generic for Ludiomil®) mirtazapine (generic for Remeron®) nefazodone (generic for Serzone®) Oleptro® Remeron® <b>Serzone®</b> trazodone (generic for Desyrel®) Wellbutrin SR® Wellbutrin XL® <b>phenelzine (generic for Nardil®)</b> <b>Nardil®</b> <b>tranylcypromine (generic for Parnate®)</b> <b>Parnate®</b> Wellbutrin®	

Selective Serotonin Reuptake Inhibitor (SSRI)
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Preferred	Non-Preferred
Celexa® citalopram (generic for Celexa®) escitalopram (generic for Lexapro®) fluoxetine (generic for Prozac®) fluvoxamine (generic for Luvox®) <b>fluvoxamine ER (generic for Luvox CR®)</b> Lexapro® Luvox CR® paroxetine (generic for Paxil®) paroxetine CR (generic for Paxil CR®) Paxil ® Paxil CR® Pexeva® Prozac ® Prozac Weekly® Sarafem® <b>Selfemra®</b> sertraline (generic for Zoloft®) Viibryd® Zoloft®	

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BEHAVIORAL HEALTH	
ANTIDEPRESSANTS (continued)	
Serotonin-Norepinephrine Reuptake Inhibitor (SNRI)	

Preferred	Non-Preferred
Cymbalta®	
<u>desvenlafaxine ER (generic for Pristiq®)</u>	
<u>Effexor®</u>	
Effexor XR®	
Pristiq®	
Savella®	
venlafaxine (generic for Effexor®)	
venlafaxine ER (generic for Effexor XR®)	

ANTIHYPERTENSIVES	
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Preferred	Non-Preferred
Adderall ®	
Adderall XR®	
amphetamine salt combo (generic for Adderall®)	
amphetamine salt combo er (generic for Adderall® XR)	
Concerta®	
Daytrana®	
Desoxyn®	
<u>Dexedrine Spansules®</u>	
dexmethylphenidate (generic for Focalin®)	
dextroamphetamine (generic for DextroStat®)	
dextroamphetamine ER (generic for Dexedrine Spansules®)	
Focalin XR®	
Focalin®	
Intuniv®	
Kapvay®	
Metadate CD®	
Metadate ER®	
methamphetamine (generic for Desoxyn®)	
Methylin ER®	
Methylin®	
methylphenidate (generic for Methylin®/Ritalin®)	
<u>methylphenidate er capsules (generic for Metadate®CD/Ritalin® LA)</u>	
methylphenidate er tablets (generic for Concerta®/Metadate®ER/Methylin®ER/Ritalin®SR)	
ProCentra®	
<u>Quillivant XR®</u>	
Ritalin®	
Ritalin® LA	
Ritalin® SR	
Strattera®	
Vyvanse®	
<u>Zenzedi®</u>	

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BEHAVIORAL HEALTH	
ATYPICAL ANTIPSYCHOTICS	
Injectable Long Acting	

Preferred	Non-Preferred
<u>Abilify Maintena®</u> fluphenazine decanoate (generic for Prolixin decanoate®) Haldol decanoate® haloperidol decanoate (generic for Haldol decanoate®) Invega Sustenna® Risperdal Consta® <u>Zyprexa Relprevv®</u>	

Oral	
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Preferred	Non-Preferred
Abilify® clozapine (generic for Clozaril®) <u>clozapine ODT (generic for FazaClo®)</u> Clozaril® Fanapt® FazaClo® Geodon® Invega® Latuda® olanzapine (generic for Zyprexa®) <u>olanzapine/fluoxetine (generic for Symbyax®)</u> quetiapine (generic for Seroquel®) Risperdal M® Risperdal® risperidone (generic for Risperdal®) risperidone ODT (generic for Risperdal M®) Saphris® Seroquel® Seroquel® XR <u>Symbyax®</u> ziprasidone (generic for Geodon®) Zyprexa Zydis® Zyprexa®	

CARDIOVASCULAR	
ACE INHIBITORS	

Preferred	Non-Preferred
benazepril (generic for Lotensin®) captopril (generic for Capoten®) enalapril (generic for Vasotec®) fosinopril (generic for Monopril®) lisinopril (generic for Prinivil® and Zestril®) moexipril (generic for Univasce®) perindopril (generic for Aceon®) quinapril (generic for Accupril®) ramipril (generic for Altace®) trandolapril (generic for Mavik®)	Accupril® <u>Aceon®</u> Altace® Lotensin® Mavik® Prinivil® Univasce® Vasotec® Zestril®

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<b>CARDIOVASCULAR</b>
<b>ACE INHIBITOR CALCIUM CHANNEL BLOCKER COMBINATIONS</b>

<b>Preferred</b>	<b>Non-Preferred</b>
amlodipine/benazepril (generic for Lotrel®) Lotrel® <span style="background-color: yellow;">trandolapril/verapamil (generic for Tarka®)</span>	Tarka®

<b>ACE INHIBITOR DIURETIC COMBINATIONS</b>
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<b>Preferred</b>	<b>Non-Preferred</b>
benazepril/HCTZ (generic for Lotensin HCT®) captopril/HCTZ (generic for Capozide®) enalapril/HCTZ (generic for Vasertec®) fosinopril/HCTZ (generic for Monopril HCT®) lisinopril/HCTZ (generic for Prinzip® and Zestoretic®) moexipril/HCTZ (generic for Uniretic®) quinapril/HCTZ (generic for Accuretic® and Quinaretic®)	Accuretic® Lotensin HCT® <span style="background-color: yellow;">Prinzip®</span> Uniretic® Vasertec® Zestoretic®

<b>ANGIOTENSIN II RECEPTOR BLOCKERS</b>
<b>Requires trial and failure of ACE Inhibitor unless contraindicated or adverse event, even when using a preferred product</b>

<b>Preferred</b>	<b>Non-Preferred</b>
Diovan® losartan (generic for Cozaar®)	Atacand® Avapro® Benicar® <span style="background-color: yellow;">candesartan (generic for Atacand®)</span> Cozaar® Edarbi® eprosartan (generic for Teveten®) irbesartan (generic for Avapro®) Micardis® Teveten®

<b>ANGIOTENSIN II RECEPTOR BLOCKER COMBINATIONS</b>
<b>Requires trial and failure of ACE Inhibitor unless contraindicated or adverse event, even when using a preferred product</b>

<b>Preferred</b>	<b>Non-Preferred</b>
Exforge® Exforge HCT®	Azor® Tribenzor® Twynsta®

North Carolina Division of Medical Assistance  
North Carolina Medicaid and Health Choice  
Preferred Drug List (PDL) **DRAFT - SL2 RR**  
Generic products are considered preferred unless indicated  
Trial and failure of two preferred agents are required unless otherwise indicated  
ALL therapeutic classes are not included on the PDL  
Prior authorization list, criteria, and forms located at: [www.nctracks.nc.gov](http://www.nctracks.nc.gov)

<b>CARDIOVASCULAR</b>
<b>ANGIOTENSIN II RECEPTOR BLOCKER DIURETIC COMBINATIONS</b>
<b>Requires trial and failure of ACE Inhibitor unless contraindicated or adverse event, even when using a preferred product</b>

<b>Preferred</b>	<b>Non-Preferred</b>
Diovan HCT® losartan/HCTZ (generic for Hyzaar®)	Atacand HCT® Avalide® Benicar HCT® cadesartan/HCTZ (generic for Atacand HCT®) Edarbyclor® Hyzaar® irbesartan/HCTZ (generic for Avalide®) Micardis HCT® Teveten HCT® valsartan/HCTZ (generic for Diovan HCT®)

<b>ANTI-ARRHYTHMICS</b>
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<b>Preferred</b>	<b>Non-Preferred</b>
amiodarone (generic for Cordarone®) disopyramide (generic for Norpace®) flecainide (generic for Tambocor®) mexiletine (generic for Mexitil®) propafenone (generic for Rythmol®) propafenone SR (generic for Rythmol SR®) quinidine gluconate (generic for Quinaglute DuraTabs®) quinidine sulfate (generic for Quinidex®) quinidine sulfate ER (generic for Quinidex Extentabs®) Tambocor®	Cordarone® Multaq® Norpace ® Norpace CR® Pacerone® Rythmol SR® Rythmol® Tikosyn®

<b>BETA BLOCKERS</b>
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<b>Preferred</b>	<b>Non-Preferred</b>
acebutolol (generic for Sectral®) atenolol (generic for Tenormin®) betaxolol (generic for Kerlone®) bisoprolol (generic for Zebeta®) carvedilol (generic for Coreg®) labetolol (generic for Trandate®) metoprolol succinate (generic for Toprol XL®) metoprolol tartrate (generic for Lopressor®) nadolol (generic for Corgard®) pindolol (generic for Visken®) propranolol (generic for Inderal®) propranolol ER/SA (generic for Inderal LA®) Sorine® sotalol (generic for Betapace® and Sorine®) timolol (generic for Blocadren®) Toprol XL®	Betapace® Betapace AF® Bystolic® Coreg ® Coreg CR® Corgard® Kerlone® Levadol® Inderal LA® Innopran XL® Lopressor® metoprolol succinate XL (generic for Toprol XL®) Sectral® Tenormin® Toprol XL® Trandate® Zebeta®

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CARDIOVASCULAR
BETA BLOCKER DIURETIC COMBINATION

<b>Preferred</b>	<b>Non-Preferred</b>
atenolol/chlorthalidone (generic for Tenoretic®) bisoprolol/HCTZ (generic for Ziac®) Corzide® Lopressor HCT® metoprolol/HCTZ (generic for Lopressor HCT®) nadolol/bendroflumethiazide (generic for Corzide®) propranolol/HCTZ (generic for Inderide®) Tenoretic®	Dutoprol® Ziac®

BILE ACID SEQUESTRANTS
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<b>Preferred</b>	<b>Non-Preferred</b>
cholestyramine cholestyramine light Colestid® colestipol tablet (generic for Colestid®) Questran ® Questran Light®	colestipol granules (generic for Colestid®) Prevalite® Welchol®

CHOLESTEROL LOWERING AGENTS
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<b>Preferred</b>	<b>Non-Preferred</b>
atorvastatin (generic for Lipitor®) lovastatin (generic for Mevacor®) pravastatin (generic for Pravachol®) simvastatin (generic for Zocor®)	Advicor® Altoprev® amlodipine/atorvastatin (generic for Caduet®) Caduet® Crestor® fluvastatin (generic for Lescol®) <div style="background-color: yellow;">Kynamro®</div> Lescol ® Lescol XL.® Lipitor® <div style="background-color: yellow;">Liptruzet®</div> Livalo® Mevacor® Pravachol® Vytorin® Zetia® Zocor®

North Carolina Division of Medical Assistance

North Carolina Medicaid and Health Choice

Preferred Drug List (PDL) **DRAFT - SL2 RR**

Generic products are considered preferred unless indicated

Trial and failure of two preferred agents are required unless otherwise indicated

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**CARDIOVASCULAR**

**CORONARY VASODILATORS**

**Preferred**

isosorbide dinitrate (generic for Isordil Titradoso®, et.al.)  
 isosorbide dinitrate ER (generic for IsoDitrate)  
 isosorbide mononitrate (generic for Ismo® and Monoket®)  
isosorbide mononitrate SR (generic for Imdur®)  
 nitroglycerin capsules  
 nitroglycerin patches (generic for Nitro-Dur® and Minitran®)  
 nitroglycerin sublingual (generic for Nitrostat®, Nitrolingula Spray®, Nitromist®)  
 Nitrostat®  
IsoDitrate®

**Non-Preferred**

Dilatrate SR®  
 Imdur®  
 Isordil®  
 Nitro-Bid®  
 Nitrolingual Spray®  
 Nitromist®

**DIHYDROPYRIDINE CALCIUM CHANNEL BLOCKERS**

**Preferred**

Afeditab CR® (generic for Adalat CC®)  
 amlodipine (generic for Norvasc®)  
Dynaïre CR®  
 felodipine ER (generic for Plendil®)  
 isradipine (generic for Dynacirc®)  
 nicardipine (generic for Cardene®)  
 Nifediac CC® (generic for Adalat CC®)  
 Nifedical XL® (generic for Procardia XL®)  
 nifedipine (generic for Procardia®)  
 nifedipine ER (generic for Adalat CC® / Procardia XL®)

**Non-Preferred**

Adalat CC®  
 Cardene SR®  
nimodipine (generic for Nimotop®)  
 nisoldipine (generic for Sular®)  
 Norvasc®  
 Procardia®  
 Procardia XL®  
 Sular®

**DIRECT RENIN INHIBITOR**

**Requires trial and failure of ACE Inhibitor unless contraindicated or adverse event, even when using a preferred product**

**Preferred**

Amturnide®  
 Tekamlo®  
 Tekturna®  
 Tekturna HCT®  
Valturna®

**Non-Preferred**

**ENDOTHELIN RECEPTOR ANTAGONISTS**

**Preferred**

Letairis®  
 Tracleer®

**Non-Preferred**

**INHALED PROSTACYCLIN ANALOGS**

**Preferred**

Tyvaso®  
 Ventavis®

**Non-Preferred**

**NIACIN DERIVATIVES**

**Preferred**

Niacor®  
 Niaspan®  
 Simcor®

**Non-Preferred**

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CARDIOVASCULAR
NITRATE COMBINATION

Preferred	Non-Preferred
Bidil®	

NON-DIHYDROPYRIDINE CALCIUM CHANNEL BLOCKERS
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Preferred	Non-Preferred
Calan® Cardizem ® <u>Cardizem LA®</u> Cartia XT® generic cardizem cd Dilacor XR® Terminated Dilt-CD® Diltia XT® diltiazem (generic for Cardizem®) diltiazem CD (generic for Cardizem CD® and Dilt-CD®) diltiazem ER (generic for Cardizem CD®) diltiazem LA (generic for Cardizem LA®) diltiazem SR (generic for Cardizem SR®) diltiazem XR (generic for Dilacor XR®) Matzim LA® Taztia XT® verapamil (generic for Calan®) verapamil ER capsules (generic for Verelan®) verapamil ER tablet (generic for Calan SR®; Isoptin SR®) verapamil PM (generic for Verelan PM®) Verelan PM®	Calan SR® Cardizem CD® <u>Cardizem LA®</u> <u>Cartia XT® (generic Cardizem CD®)</u> Covera HS® Dilt XR® (generic for Diltia XT®/Dilacor XR®) Dilt-CD® (generic Cardizem CD®) Diltia XT® diltiazem CD capsules (generic Cardizem CD®) diltiazem ER 12 hour (generic for Cardizem SR®) diltiazem ER 24 hour (generic for Diltia XT®/Dilacor XR®/Tiazac®) Diltzac ER® (generic for Tiazac®) Matzim LA® (generic for Cardizem LA®) <u>Taztia XT® (generic Tiazac®)</u> Tiazac® Verelan®

ORAL PULMONARY HYPERTENSION
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Preferred	Non-Preferred
Adcirca® <u>sildenafil (generic for Revatio®)</u>	Revatio®

PLATELET INHIBITORS
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Preferred	Non-Preferred
Aggrenox® clopidogrel (generic for Plavix®) dipyridamole (generic for Persantine®) ticlopidine (generic for Ticlid®)	Brilinta® Effient® Persantine® Plavix®

RANEXA
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Preferred	Non-Preferred
Ranexa®	

North Carolina Division of Medical Assistance  
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<b>CARDIOVASCULAR</b>
<b><u>SYMPATHOLYTICS AND COMBINATIONS</u></b>

<u>Preferred</u>	<u>Non-Preferred</u>
<u>Catapres®</u> <u>Catapres®-TTS</u> <u>clonidine (generic for Catapres®)</u> <u>Clorpres®</u> <u>guanfacine (generic for Tenex®)</u> <u>methyldopa (generic for Aldomet®)</u> <u>methyldopa/HCTZ (generic for Aldoril®)</u> <u>methyldopate injection (generic for Aldomet® Injection)</u> <u>reserpine (generic for Serpelan®)</u> <u>Tenex®</u>	<u>clonidine patches (generic for Catapres®-TTS)</u>

<b>TRIGLYCERIDE LOWERING AGENTS</b>
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Preferred	Non-Preferred
gemfibrozil (generic for Lopid®) Tricor® Trilipix®	<p style="color: red;"><b>Exemption for use of Lovaza® in patients with triglycerides ≥500mg/dl</b></p> Antara® fenofibrate (generic for Antara®, Lofibra®, Tricor®) fenofibric acid (generic for Fibricor®) Fibricor® <u>Juxtapid®</u> Lipofen® Lofibra® Lopid® Lovaza® (name change for Omacor®) Triglide® <u>Vascepa®</u>

<b>CENTRAL NERVOUS SYSTEM</b>
<b>ANTIMIGRAINE AGENTS</b>
<b>Quantity limits apply to triptans</b>

Preferred	Non-Preferred
<u>Maxalt-MLT®</u> sumatriptan (generic for Imitrex®)	<u>Alsuma®</u> Amerge® Axert® Cambia® Frova® Imitrex® Maxalt ® <u>Maxalt MLT®</u> naratriptan (generic for Amerge®) Relpax® <u>rizatriptan (generic for Maxalt®)</u> <u>rizatriptan ODT (generic for Maxalt MLT®)</u> Sumavel DosePro® Treximet® <u>zolmitriptan (generic for Zomig®)</u> <u>zolmitriptan ODT (generic for Zomig ZMT®)</u> Zomig ® Zomig ZMT®

North Carolina Division of Medical Assistance  
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CENTRAL NERVOUS SYSTEM
ANTINARCOLEPSY/ANTIHYPERKINESIS

**Preferred**

**Non-Preferred**

**Clinical criteria apply**

modafinil (generic for Provigil®) Nuvigil® Provigil®
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ANTIPARKINSON AND RESTLESS LEG SYNDROME AGENTS
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**Preferred**

**Non-Preferred**

benztropine (generic for Cogentin®)  
bromocriptine (generic for Parlodel®)  
carbidopa/levodopa (generic for Sinemet®)  
carbidopa/levodopa ER (generic for Sinemet CR®)  
carbidopa/levodopa ODT (generic for Sinemet ODT®)  
pramipexole (generic for Mirapex®)  
ropinirole (generic for Requip®)  
selegiline (generic for Emsam®)  
trihexyphenidyl (generic for Artane®)

Azilect® carbidopa/levodopa/entacapone (generic for Stalevo®) Comtan® <u>entacapone (generic for Comtan®)</u> Horizant® Mirapex ® Mirapex ER® <u>Neupro®</u> Parcopa® Parlodel® Requip ® Requip XL® <u>ropinirole ER (generic for Requip XL®)</u> Sinemet ® <u>Sinemet CR®</u> Sinemet ODT® Stalevo® Tasmar® Zelapar®
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MULTIPLE SCLEROSIS
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**Preferred**

**Non-Preferred**

Avonex®  
Avonex Pack®  
Avonex Pen®  
Betaseron®  
Copaxone®  
Rebif®

Ampyra® <u>Aubagio®</u> Extavia® Gilenya® <u>Rebif Rebidose®</u> <u>Tecfidera®</u>
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North Carolina Division of Medical Assistance  
North Carolina Medicaid and Health Choice  
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**CENTRAL NERVOUS SYSTEM**

**SEDATIVE HYPNOTICS**

**Quantity limits apply**

**Preferred**

estazolam (generic for Prosom®)  
flurazepam (generic for Dalmane®)  
temazepam 15mg, 30mg (generic for Restoril®)  
triazolam (generic for Halcion®)  
zolpidem (generic for Ambien®)

**Non-Preferred**

Ambien®  
AmbienCR®  
Doral®  
Edluar®  
Halcion®  
Intermezzo®  
Lunesta®  
Restoril®  
Rozerem®  
Silenor®  
Sonata®  
temazepam 7.5, 22.5 mg (generic for Restoril®)  
zaleplon (generic for Sonata®)  
zolpidem ER (generic for Ambien CR®)  
Zolpimist®

**SMOKING CESSATION**

**Preferred**

**Quantity limits of a 6 months supply per 12 months apply to Chantix**

bupropion SR (generic for Zyban®)  
Chantix®  
Nicorette®  
nicotine gum  
nicotine lozenge  
nicotine patch

**Non-Preferred**

Commit lozenge®  
Nicoderm CQ patch®  
Nicotrol®  
Zyban®

**ENDOCRINOLOGY**

**GROWTH HORMONE**

**Clinical criteria apply**

**Preferred**

Norditropin ®  
Nutropin AQ®  
Nutropin®  
Serostim®

**Non-Preferred**

Genotropin®  
Humatrope®  
Omnitrope®  
Saizen®  
TevTropin®  
Zorbtive®

North Carolina Division of Medical Assistance  
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ENDOCRINOLOGY	
HYPOGLYCEMICS - INJECTABLE	
Rapid Acting Insulin	
Preferred	Non-Preferred
Humalog cartridge®	Apidra cartridge®
Humalog vial®	Apidra Solostar®
Novolog cartridge®	Apidra vial®
Novolog Flexpen®	Humalog cartridge®
Novolog vial®	Humalog Kwikpen®
	Humalog pen®
	Novolog cartridge®
Short Acting Insulin	
Preferred	Non-Preferred
Humulin R vial®	Novolin R vial®
Novolin R vial®	
Intermediate Acting Insulin	
Preferred	Non-Preferred
Humulin N vial®	Novolin N vial®
Novolin N vial®	
Humulin N pen®	
Long Acting Insulin	
Preferred	Non-Preferred
Lantus Solostar®	Lantus cartridge®
Lantus vial®	Levemir FlexPen®
Levemir vial®	
Premixed Combination Insulin	
Preferred	Non-Preferred
Humalog Mix 75/25 vial®	Humalog Mix 50/50 Kwikpen®
Humalog Mix 50/50 vial®	Humalog Mix 75/25 Kwikpen®
Humlin Mix 50/50 vial®	
Novolog Mix 70/30 Flexpen®	
Novolog Mix 70/30 vial®	
Premixed 70/30 Combination Insulin	
Preferred	Non-Preferred
Humulin 70/30 pen®	Novolin 70/30 vial®
Humulin 70/30 vial®	
Novolin 70/30 vial®	
Amylin Analogs	
Requires trial and failure or insufficient response to metformin containing products unless contraindication or adverse event even when using a preferred product	
Preferred	Non-Preferred
Symlin®	

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ENDOCRINOLOGY	
HYPOGLYCEMICS - INJECTABLE (Continued)	
GLP-1 Receptor Agonists	
<b>requires trial and failure or insufficient response to metformin containing products unless contraindication or adverse event even when using a preferred product</b>	

Preferred	Non-Preferred
Byetta®	Continuation of therapy requires documentation that clinical goals have been met Bydureon® Victoza®

HYPOGLYCEMICS - ORAL	
2nd Generation Sulfonylureas	

Preferred	Non-Preferred
Amaryl® Diabeta® glimepiride (generic for Amaryl®) glipizide (generic for Glucotrol®) glipizide ER (generic for Glucotrol XL®) Glucotrol® Glucotrol XL® glyburide (generic for Micronase® and DiaBeta®) glyburide micronized (Glynase®) Glynase®	

Alpha-Glucosidase Inhibitors	
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Preferred	Non-Preferred
acarbose (generic for Precose®) Glyset® Precose®	

Biguanides and Combinations	
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Preferred	Non-Preferred
glipizide-metformin (generic for Metaglip®) glyburide-metformin (generic for Glucovance®) metformin (generic for Glucophage®) metformin ER (generic for Glucophage ER®)	Fortamet® Glucophage® Glucophage XR® Glucovance® Glumetza® Riomet®

DPP-IV Inhibitors and Combinations	
<b>requires trial and failure or insufficient response to metformin containing products unless contraindication or adverse event even when using a preferred product</b>	

Preferred	Non-Preferred
Janumet XR® Janumet® Januvia® Jentadueto® Juvisync® Kombiglyze XR® Onglyza® Tradjenta®	Kazano® Kombiglyze XR® Nesina® Onglyza® Oseni®

North Carolina Division of Medical Assistance  
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ENDOCRINOLOGY
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Meglitinides
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Preferred	Non-Preferred
Prandin® nateglinide (generic for Starlix®)	Starlix®

Meglitinides Combinations
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HYPOGLYCEMICS - ORAL (Continued)	
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitor	
requires trial and failure or insufficient response to metformin containing products unless contraindication or adverse event even when using a preferred product	
Preferred	Non-Preferred
	Invokana®

Thiazolidinediones
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Preferred	Non-Preferred
Actos® Avandia® pioglitazone (generic for Actos®)	Actos® Avandia®

Thiazolidinedione-Metformin Combinations
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Preferred	Non-Preferred
ActoPlus-Met® Avandamet® pioglitazone / metformin (generic for ActosPlus Met®)	ActoPlus Met® Acto Plus Met XR® Avandamet®

Thiazolidinedione-Sulfonylurea Combinations
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Preferred	Non-Preferred
Avandaryl® Duetact®	Avandaryl® pioglitazone / glimeperide (generic for Duetact®)

GASTROINTESTINAL
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BILE ACID SALTS
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Preferred	Non-Preferred
Actigall® Urso ® Urso Forte® ursodiol (generic for Urso®) ursodiol forte (generic for Urso Forte®)	Chenodal®

H. PYLORI COMBINATIONS
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Preferred	Non-Preferred
Prevpac®	Helidac® Omeclamox-Pak® Pylera®

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GASTROINTESTINAL
HISTAMINE-2 RECEPTOR ANTAGONISTS

Preferred	Non-Preferred
famotidine (generic for Pepcid®) ranitidine (generic for Zantac®)	Axid ® cimetidine (generic for Tagamet®) nizatidine (generic for Axid®) Pepcid® Zantac®

ANTIEMETIC-ANTIVERTIGO AGENTS
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Preferred	Non-Preferred
dimenhydranate injection <u>Marinol®</u> meclizine (generic for Antivert®) metoclopramide (generic for Reglan®) ondansetron (generic for Zofran®) ondansetron ODT (generic for Zofran ODT®) prochlorperazine (generic for Compazine®) promethazine (generic for Phenergan®) <u>Seopace®</u> Transderm-Scop® trimethobenzamide (generic Tigan®)	Anzemet® Cesamet® <u>Diclegis®</u> dronabinol (generic for Marinol®) granisetron tablets (generic for Kytril®) <u>Kytril tablet®</u> <u>Marinol®</u> Metozolv ODT® Sancuso® Zofran ® Zofran ODT® <u>Zuplenz®</u>
<b>Clinical criteria apply</b> Emend®	

PANCREATIC ENZYMES
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Preferred	Non-Preferred
Creon® pancrelipase Zenpep®	Pancreaze® <u>Pertzye®</u> <u>Ultresa®</u> <u>Viokace®</u>

PROGESTINS USED FOR CACHEXIA
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Preferred	Non-Preferred
megestrol (generic for Megace®)	Megace® Megace ES®

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GASTROINTESTINAL
PROTON PUMP INHIBITORS

Preferred	Non-Preferred
lansoprazole OTC (generic for Prevacid® OTC) omeprazole (generic Prilosec®) omeprazole OTC (generic Prilosec® OTC) pantoprazole (generic for Protonix®) Prilosec OTC®	<div style="color: red; font-weight: bold; text-align: center; padding-bottom: 5px;">Exemption applies to patients &lt; 12 years old</div> Aciphex® Dexilant® (formerly Kapidex®) lansoprazole (generic for Prevacid®) Nexium capsules®/Nexium suspension® omeprazole-sodium bicarbonate <span style="background-color: yellow;">omeprazole-sodium bicarbonate OTC (generic for Zegerid OTC®)</span> Prevacid® Prevacid OTC® Prilosec® Protonix® Zegerid OTC®

SELECTIVE CONSTIPATION AGENTS
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Preferred	Non-Preferred
Amitiza®	<span style="background-color: yellow;">Linzess®</span>

ULCERATIVE COLITIS
Oral

Preferred	Non-Preferred
Apriso® Asacol® balsalazide (generic for Colazal®) Pentasa® sulfasalazine DR (generic for Azulfidine <u>Entab®</u> ) sulfasalazine IR(generic for Azulfidine®)	Asacol HD® Azulfidine Entab® Azulfidine® Colazal® <span style="background-color: yellow;">Delzicol®</span> Dipentum® <span style="background-color: yellow;">Giazo®</span> Lialda®

Rectal
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Preferred	Non-Preferred
Canasa suppository® mesalamine enema/kit (generic for Rowasa®) Rowasa enema® Rowasa enema kit® SFRowasa®	

North Carolina Division of Medical Assistance  
North Carolina Medicaid and Health Choice  
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GENTOURINARY/RENAL
BENIGN PROSTATIC HYPERPLASIA TREATMENTS

<b>Preferred</b>	<b>Non-Preferred</b>
doxazosin (generic for Cardura) finasteride (generic for Proscar®) Proscar® tamsulosin (generic for Flomax®) terazosin (generic for Hytrin®) Uroxatral®	alfuzosin (generic for Uroxatral®) Avodart® Cardura XL® Cardura® Flomax® Jalyn® Rapaflo®  <b>Clinical Criteria Apply</b> Cialis®

ELECTROLYTE DEPLETERS
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<b>Preferred</b>	<b>Non-Preferred</b>
calcium acetate capsule (generic for Phoslo®) calcium acetate tablet (generic for Eliphos®) Eliphos® Fosrenol® Renagel® Renvela®	<p style="color: red; text-align: center;"><b>Exemption for use of Renvela Powder Pack in patients &lt; 12 years old.</b></p> Magnebind® PhosLo® Phoslyra® Renvela Powder Pack®

URINARY ANTISPASMODICS
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<b>Preferred</b>	<b>Non-Preferred</b>
flavoxate (generic for Urispas®) oxybutynin (generic for Ditropan®) Toviaz® Vesicare®	Detrol ® Detrol LA® Ditropan XL® Enablex® flavoxate (generic for Urispas®) Gelnique® Myrbetriq® oxybutynin ER (generic for Ditropan XL®) Oxytrol® Sanctura ® Sanctura XR® tolterodine (generic for Detrol®) trospium (generic for Sanctura®) trospium ER (generic for Sanctura XR®) Vesicare®

GOUT
XANTHINE OXIDASE INHIBITORS

<b>Preferred</b>	<b>Non-Preferred</b>
allopurinol (generic for Zyloprim®)	Uloric® Zyloprim®

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HEMATOLOGIC
HEMATOPOIETIC AGENTS
Clinical criteria apply

Preferred	Non-Preferred
Aranesp® Epogen® Procrit®	

ANTICOAGULANTS
Injectable

Preferred	Non-Preferred
Arixtra® Fragmin® Lovenox®	Arixtra® enoxaparin (generic for Lovenox®) fondaparinux (generic for Arixtra®)

Oral
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Preferred	Non-Preferred
Coumadin® Jantoven® (generic for Coumadin®) Pradaxa® warfarin (generic for Coumadin®) Xarelto®	Eliquis®

THROMBOPOIESIS STIMULATING AGENTS
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Preferred	Non-Preferred
Neumega® Nplate® Promacta®	

OPHTHALMIC
ALLERGIC CONJUNCTIVITIS AGENTS

Preferred	Non-Preferred
Alrex® cromolyn sodium (generic for Crolom®) Pataday®	Alamast® Alocril® Alomide® Alrex® azelastine (generic for Optivar®) Bepreve® Elestat® Emadine® epinastine (generic for Elestat®) Lastacaft® Optivar® Patanol®

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OPHTHALMIC
ANTIBIOTICS

<b>Preferred</b>	<b>Non-Preferred</b>
Azasite®	bacitracin ointment (generic for AK-Tracin®)
bacitracin/polymyxin ointment (generic for Polysporin®)	Besivance®
ciprofloxacin solution (generic for Ciloxan®)	Bleph-10®
erythromycin ointment (generic for Ilotycin®)	Ciloxan®
gentamicin (generic for Garamycin®)	Garamycin®
Moxeza®	Iquix®
neomycin/bacitracin/polymyxin ointment (generic for Neosporin® Ophthalmic Ointment)	levofloxacin (generic for Quixin®)
neomycin/polymyxin/gramicidin drops (generic for Neosporin® Ophthalmic Drops)	Natacyn®
ofloxacin (generic for Ocuflox®)	Neosporin®
polymyxin/trimethoprim (generic for Polytrim®)	Ocuflox®
sulfacetamide drops (generic for Bleph-10®)	Polytrim®
tobramycin (generic for Tobrex®)	Quixin®
triple-antibiotic	sulfacetamide ointment (generic for Cetamide®)
Vigamox®	Tobrex®
	Zymaxid®

ANTIBIOTICS-STEROID COMBINATIONS
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<b>Preferred</b>	<b>Non-Preferred</b>
neomycin/bacitracin/polymyxin/hydrocortisone (generic for Neo-Polycin HC®)	Blephamide®
neomycin/polymyxin/dexamethasone (generic for Maxitrol®)	Blephamide S.O.P.® Ointment
neomycin/polymyxin/hydrocortisone (generic for Cortisporin®)	Maxitrol® Ointment
sulfacetamide/prednisolone (generic for Vasocidin®)	Maxitrol® Suspension
Tobradex® Ointment	Pred-G® Ointment
Tobradex® Suspension	Pred-G® Suspension
	Tobradex® ST
	tobramycin/dexamethasone suspension (generic for Tobradex®)
	Zylet®

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OPHTHALMIC
ANTI INFLAMMATORY

Preferred	Non-Preferred
dexamethasone (generic for Decadron®)	Acular ®
diclofenac (generic for Voltaren®)	Acular LS®
Flarex®	Acuvail®
fluorometholone (generic for FML®)	Bromday®
flurbiprofen (generic for Ocufen®)	bromfenac (generic for Xibrom®)
FML Forte®	Durezol®
FML S.O.P® ointment	FML®
ketorolac 0.4% (generic for Acular LS®)	Ilevro®
ketorolac 0.5% (generic for Acular®)	Lotemax Gel®
Lotemax Drops®	Lotemax Ointment®
Maxidex®	Nevanac®
Pred Mild®	Ocufen®
prednisolone acetate (generic for Pred Forte®)	Omnipred®
prednisolone sodium phosphate (generic for Inflammase Forte®)	Ozurdex®
	Pred Forte®
	Prolensa®
	Retisert®
	Triesence®
	Vexol®
	Voltaren drops®
	Xibrom®

GLAUCOMA
Alpha 2 Adrenergic Agents

Preferred	Non-Preferred
Alphagan P®	brimonidine P (generic for Alphagan P®)
apraclonidine (generic for Iopidine®)	Iopidine®
brimonidine (generic for Alphagan®)	

Beta Blocker Agents
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Preferred	Non-Preferred
betaxolol (generic for Betoptic®)	Betagan®
Betimol®	Betoptic S®
carteolol (generic for Ocupress®)	Optipranolol®
Combigan®	Timoptic®
Istalol®	Timoptic XE®
levobunolol (generic for Betagan®)	
metipranolol (generic for OptiPranolol®)	
timolol (generic for Timoptic®/ Timoptic XE®)	

Carbonic Anhydrase Inhibitors
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Preferred	Non-Preferred
Azopt®	Cosopt ®
dorzolamine (generic for Trusopt®)	Cosopt PF®
dorzolamine/timolol (generic for Cosopt®)	Simbrinza®
	Trusopt®

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OPHTHALMIC	
GLAUCOMA (Continued)	
Prostaglandin Agonists	

Preferred	Non-Preferred
latanoprost (generic for Xalatan®)	Lumigan®
Travatan®	<u>Rescula®</u>
Travatan Z®	<u>travoprost (generic for Travastan®)</u>
	Xalatan®
	Zioptan®

OSTEOPOROSIS	
BONE RESORPTION SUPPRESSION AND RELATED AGENTS	

Preferred	Non-Preferred
alendronate tablet (generic for Fosamax®)	Actonel®
calcitonin salmon nasal (generic for Miacalcin®)	<u>alendronate solution (generic for Fosamax® Solution)</u>
etidronate (generic for Didronel®)	Atelvia®
Evista®	<u>Binosto®</u>
Fortical®	Boniva tablet®
Miacalcin®	Didronel®
	Forteo®
	Fosamax ®
	Fosamax Plus D®
	ibandronate (generic for Boniva®)
	Prolia®

OTIC	
ANTIBIOTICS	

Preferred	Non-Preferred
Ciprodex®	<u>Cetraxal®</u>
neomycin/polymyxin/hc (generic for Cortisporin®)	Cipro HC®
ofloxacin (generic vor Floxin®)	<u>ciprofloxacin (generic for Cetraxal®)</u>
	Coly-Mycin S®
	Cortisporin®
	Cortisporin-TC®

ANTI-INFECTIVES AND ANESTHETICS	
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Preferred	Non-Preferred
<u>acetic acid (generic for Vosol®)</u>	acetic acid / hydrocortisone (generic for Vosol HC®)
<u>acetic acid/aluminum (generic for Domeboro®)</u>	Aurax®
<u>antipyrine/benzocaine (generic for Auralgan®)</u>	Myoxin®
	Otic Care®
	Oto-End 10®
	Otozin®
	Pinnacaine®
	pramoxine-HC (generic for Oto-End 10®)
	Treagan®
	<u>Vosol HC®</u>

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RESPIRATORY
BETA-ADRENERGIC HANDHELD, LONG ACTING

<b>Preferred</b>	<b>Non-Preferred</b>
Foradil® Serevent Diskus®	Arcapta Neohaler®

BETA-ADRENERGICS HANDHELD, SHORT ACTING
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<b>Preferred</b>	<b>Non-Preferred</b>
<b>Effective through March 31, 2013</b>	
Proventil HFA® Ventolin HFA®	Maxair Autohaler® Proair HFA® Relion Ventolin HFA® Xopenex HFA®
<b>Effective April 1, 2013</b>	
<b>Preferred</b>	<b>Non-Preferred</b>

Proair HFA® Proventil HFA®	Maxair Autohaler® Relion Ventolin HFA® Ventolin HFA® Xopenex HFA®
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BETA-ADRENERGIC NEBULIZERS
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<b>Preferred</b>	<b>Non-Preferred</b>
albuterol sulfate 2.5 mg/0.5 ml albuterol sulfate 2.5 mg/3 ml albuterol sulfate 100mg/20 ml	<p style="color: red; text-align: center;"><b>Exemption for use of Accuneb/generic Accuneb in patients &lt; 2 years old</b></p> Accuneb® albuterol 0.63 mg/3 ml (generic Accuneb®) albuterol 1.25 mg/3 ml (generic Accuneb®) Brovana® levalbuterol solution (generic of Xopenex®) Perforomist® Xopenex®

BETA-ADRENERGIC, ORAL
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<b>Preferred</b>	<b>Non-Preferred</b>
albuterol tablets(generic for Proventil Repetabs®) albuterol syrup (generic for Ventolin syrup®) metaproterenol syrup (generic for Alupent® Syrup) terbutaline (generic for Brethine®)	albuterol ER (generic for VoSpire ER®) metaproterenol tablet (generic for Alupent® Tablet) VoSpire ER®

COPD AGENTS
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<b>Preferred</b>	<b>Non-Preferred</b>
Atrovent HFA® Combivent® Combivent Respimant® ipratropium nebulizer solution (generic for Atrovent Nebulizer Solution®) ipratropium-albuterol (generic for Duoneb®) Spiriva®	<p style="color: red; text-align: center;"><b>Failure of only one preferred required</b></p> Daliresp® Duoneb® Tudorza Pressair®

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### RESPIRATORY

#### CORTICOSTEROIDS

**Clinical criteria apply**

##### Preferred

Pulmicort Respules® 0.25mg, 0.5mg  
QVAR®

##### Non-Preferred

Alvesco®  
Asmanex®  
budesonide suspension 0.25 mg/2 ml; 0.5 mg/2 ml  
Flovent Diskus®  
Flovent HFA®  
Pulmicort®  
Pulmicort 1 mg Respules

#### CORTICOSTEROID COMBINATION

**Clinical criteria apply**

##### Preferred

Advair Diskus®  
Advair HFA®  
Dulera®  
Symbicort®

##### Non-Preferred

Dulera®

#### INTRANASAL RHINITIS AGENTS

##### Preferred

Astelin®  
Astepro Nasal Spray®  
flunisolide (generic of Nasalide®)  
fluticasone (generic for Flonase®)  
ipratropium nasal(generic for Atrovent Nasal®)  
Nasacort AQ®  
Nasonex®  
Patanase®

##### Non-Preferred

**Exemption for steroids applies to patients < 4 years old**

Atrovent®  
azelastine (generic for Astelin®)  
Beconase AQ®  
Dymista®  
Flonase®  
ipratropium (generic for Atrovent®)  
Nasacort AQ®  
Nasonex®  
Omnaris®  
QNASL®  
Rhinocort Aqua®  
triamcinolone (generic for Nasacort AQ®)  
Veramyst®  
Zetonna®

#### LEUKOTRIENE MODIFIERS

**Clinical criteria apply**

##### Preferred

Accolate®  
montelukast chewable tablet (generic for Singulair® Chewable Tablet)  
montelukast tablet (generic for Singulair® Tablet)  
Singulair® Granules

##### Non-Preferred

montelukast granules (generic for Singulair® Granules)  
Singulair® Chewable Tablet  
Singulair® Tablet  
zafirlukast (generic for Accolate®)  
Zyflo CR®  
Zyflo®

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RESPIRATORY
LOW SEDATING ANTIHISTAMINES

Preferred	Non-Preferred
cetirizine OTC syrup (generic for Zyrtec OTC® Syrup)	<b>Exemption for use of Clarinex syrup in patients &lt; 2 years old</b>
cetirizine OTC tablets (generic for Zyrtec OTC® Tablets)	Allegra ODT, suspension, tablet® Terminated 7/31/2013
cetirizine RX syrup (generic for Zyrtec Syrup®)	cetirizine OTC chewable tablet (generic for Zyrtec® OTC Chewable Tablet)
Claritin® OTC	cetirizine RX syrup (generic for Zyrtec®)
loratadine OTC (generic for Claritin OTC®)	Clarinex®
	Claritin® OTC
	desloratadine (generic for Clarinex®)
	fexofenadine OTC (generic for Allegra OTC®)
	fexofenadine RX (generic for Allegra®)
	levocetirizine (generic for Xyzal®)
	Xyzal®
	Zyrtec OTC®
	Zyrtec Rx®

LOW SEDATING ANTIHISTAMINE COMBINATION
Quantity limits of 102 days supply per 12 months apply / PA required

Preferred	Non-Preferred
cetirizine-D OTC (generic for Zyrtec-D OTC)	Allegra-D 12-Hour, 24-Hour®
loratadine-D OTC (generic for Claritin-D OTC)	cetirizine-D OTC (generic for Zyrtec D® OTC)
	Clarinex-D®
	Claritin-D® OTC
	Claritin-D® RX Terminated
	fexofenadine-D RX (generic for Allegra-D®)
	loratadine-D OTC (generic for Claritin D OTC)
	Zyrtec-D OTC®
	Semprex-D®

TOPICALS
ACNE AGENTS

Preferred	Non-Preferred
Azelex®	Acanya®
Benzaclin®	Aczone®
benzoyl peroxide gel, lotion, pad	adapalene (generic Differin®)
clindamycin phosphate solution (generic for Cleocin-T® Solution)	Akne-Mycin®
Differin®	Atralin®
erythromycin gel (generic for EryGel®)	Avar
erythromycin solution (generic for EryDerm®, EryMax®, A/T/S®, T-Stat® Solution)	Avar LS®
Retin-A Micro Gel®	Avar-E ®
tretinoin (generic for Retin-A®)	Avar-E LS®
	Avita®
	BenzaClin-Carekit®
	Benzamycin®
	Benzefoam®/Ultra®
	Benzepro®
	benzoyl peroxide cleanser, kit, towelette
	benzoyl peroxide microspheres
	benzoyl peroxide/urea

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TOPICALS	
ACNE AGENTS (continued)	
	BP 10-1®
	BP Cleansing Wash®
	bpo (generic for Triaz®)
	bpo/sulfur
	Cerisa®
	Clarifoam EF®
	Clenia®
	Cleocin T®
	Clinac-BPO®
	Clindacin®
	Clindagel®
	clindamycin / benzoyl peroxide (generic Benzaclin®; Duac®)
	clindamycin phosphate foam (generic for Evoclin®)
	clindamycin phosphate gel (generic for Cleocin-T® Gel)
	clindamycin phosphate lotion (generic for Cleocin-T® Lotion)
	clindamycin phosphate pledgets (generic for Cleocin-T® Pledgets)
	Delos®
	Duac ®
	Duac-CS®
	Epiduo®
	erythromycin gel (generic for EryGel®)
	erythromycin pledgets (generic for Emcin®, Erycette®, T-Stat® - Pads)
	erythromycin solution (generic for EryDerm®, EryMax®, A/T/S®, T-Stat® Solution)
	erythromycin/benzoyl peroxide (generic for Benzamycin®)
	Evoclin®
	Inova®
	Klaron®
	Lavoclen®
	Nuox®
	Ovace ®
	Ovace Plus®
	Pacnex®
	Prascion®
	Retin-A ®
	Retin-A Micro Gel Pump®
	Rosamil®
	Rosula®
	se 10-5 ss (generic for Plexion SCT®)
	se bpo (generic for Triaz®)
	SSS 10-5® Foam
	sulfacetamide (generic for Klaron®)
	sulfacetamide sodium/avobenzone/sulfur
	sulfacetamide sodium/sulfur (generic for Rosamil®)
	sulfacetamide/avobenzone/sulfur
	sulfacetamide/sulfur (generic for Sumaxin®)
	sulfacetamide/sulfur/urea
	sulfacetamide/urea
	Sumadan®
	Sumaxin®

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TOPICALS	
ACNE AGENTS (continued)	
	Tazorac® <u>TL Triseb®</u> <u>tretinoin microsphere (generic of Retin-A Micro®)</u> Veltin® Ziana®
ANDROGENIC AGENTS	
Preferred	Non-Preferred
Androderm® Androgel®	Androderm® Axiron® Fortesta® Testim®
ANESTHETICS	
Preferred	Non-Preferred
Voltaren Gel®	<b>Clinical criteria apply to Lidoderm®</b> Flector® Lidoderm® Pennsaid® Qutenza®
ANTIBIOTIC	
Preferred	Non-Preferred
gentamicin mupirocin ointment (generic of Bactroban® Ointment) neomycin/polymyxin/pramoxine	Altabax® Bactroban® Centany® <u>mupirocin cream (generic for Bactroban® Cream)</u> Centany AT®
ANTIBIOTIC, VAGINAL	
Preferred	Non-Preferred
<u>Cleocin Ovules</u> <u>Cleocin® Vaginal Cream</u> <u>clindamycin vaginal (generic for Cleocin® Vaginal Cream)</u> <u>Metrogel® Vaginal</u>	<u>metronidazole vaginal (generic for Metrogel® Vaginal)</u> <u>Vandazole ®</u>

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TOPICALS
ANTIFUNGAL

Preferred	Non-Preferred
	Clinical criteria apply to Vusion®
ciclopirox cream (generic for Loprox® Cream)	<u>Benasal HP®</u>
<u>ciclopirox kit (generic for Loprox® Kit)</u>	Ciclodan®
ciclopirox solution (generic for Penlac® Solution)	<u>ciclopirox cream (generic for Loprox® Cream)</u>
clotrimazole RX- (generic for Lotrimin® RX)	ciclopirox gel (generic for Loprox® Gel)
clotrimazole/betamethasone cream (generic for Lotrisone® cream)	<u>ciclopirox kit (generic for Loprox® Kit)</u>
<u>clotrimazole/betamethasone lotion (generic for Lotrisone® lotion)</u>	ciclopirox shampoo (generic for Loprox® Shampoo)
ketoconazole cream (generic for Nizoral® Cream)	ciclopirox suspension (generic for Loprox® Suspension)
<u>ketoconazole foam (generic for Nizoral® Foam)</u>	<u>clotrimazole/betamethasone lotion (generic for Lotrisone® lotion)</u>
ketoconazole shampoo (generic for Nizoral® Shampoo)	CNL 8®
nystatin (generic for Mycostatin®; Nystop®)	econazole (generic for Spectazole®)
<u>nystatin/triamcinolone (generic for Mycolog II®)</u>	Ertaczo®
	Exelderm®
	Extina®
	<u>Ketoeon Plus®</u>
	<u>ketoconazole foam (generic for Nizoral® Foam)</u>
	<u>Ketodan® Foam</u>
	<u>Lamisil®</u>
	Loprox®
	Lotrisone®
	Mentax®
	Naftin®
	Nizoral®
	<u>nystatin/triamcinolone (generic for Mycolog II®)</u>
	Oxistat®
	Pediaderm AF®
	Pedipirox-4®
	Penlac®
	Vusion®
	Xolegel®

ANTIPARASITICS
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Preferred	Non-Preferred
<u>Acticin®</u>	<u>Elimite®</u>
Eurax®	lindane
<u>Ovide lotion®</u>	malathion (generic for Ovide®)
permethrin cream Rx (generic for Elimite®)	Natroba®
Ulesfia®	<u>Ovide®</u>
	<u>Sklice®</u>
	<u>Spinosad®</u>

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TOPICALS
ANTIVIRAL

Preferred	Non-Preferred
Zovirax ointment®	<div style="background-color: yellow; padding: 2px;">acyclovir (generic for Zovirax®)</div> <div style="padding: 2px;">Denavir®</div> <div style="background-color: yellow; padding: 2px;">Lidovir®</div> <div style="padding: 2px;">Xerese®</div> <div style="padding: 2px;">Zovirax cream®</div>

IMMUNOMODULATORS
Clinical criteria apply

Preferred	Non-Preferred
Elidel® Protopic®	

PSORIASIS
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Preferred	Non-Preferred
calciptriene ointment (generic Dovonex® Ointment) calciptriene solution (generic Dovonex® Solution ) Dovonex Cream®	<div style="background-color: yellow; padding: 2px;">calciptriene cream (generic Dovonex®)</div> <div style="padding: 2px;">Calcitrene®</div> <div style="padding: 2px;">calcitriol (generic for Vectical®)</div> <div style="padding: 2px;">Dovonex solution®</div> <div style="background-color: yellow; padding: 2px;">Sorilux®</div> <div style="padding: 2px;">Taclonex ®</div> <div style="padding: 2px;">Taclonex Scalp®</div> <div style="padding: 2px;">Vectical®</div>

STEROIDS
Low Potency

Preferred	Non-Preferred
alclometasone dipropionate (generic for Aclovate®) <div style="background-color: yellow; padding: 2px;">Derma Smoothe FS®</div> desonide cream/ointment (generic for Tridesilon®) hydrocortisone hydrocortisone/aloe gel <div style="background-color: yellow; padding: 2px;">hydrocortisone/mineral oil/petrolatum oint</div>	<div style="background-color: yellow; padding: 2px;">Aclovate®</div> <div style="background-color: yellow; padding: 2px;">Ala-Cort Cream®</div> <div style="padding: 2px;">Aqua Glycolic HC®</div> <div style="padding: 2px;">Capex® Shampoo</div> <div style="padding: 2px;">Desonate®</div> <div style="padding: 2px;">desonide lotion (generic for Desowen®)</div> <div style="background-color: yellow; padding: 2px;">Desonil-Plus®</div> <div style="padding: 2px;">DesOwen®</div> <div style="padding: 2px;">fluocinolone oil (generic for Derma-Smoothe FS®)</div> <div style="background-color: yellow; padding: 2px;">hydrocortisone/aloe lotion</div> <div style="background-color: yellow; padding: 2px;">hydrocortisone/mineral oil/pet oint</div> <div style="padding: 2px;">hydrocortisone/urea</div> <div style="padding: 2px;">Pediaderm HC®</div> <div style="padding: 2px;">Pediaderm TA®</div> <div style="padding: 2px;">Texacort®</div> <div style="padding: 2px;">Verdeso®</div>

North Carolina Division of Medical Assistance  
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Generic products are considered preferred unless indicated  
Trial and failure of two preferred agents are required unless otherwise indicated  
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TOPICALS	
STEROIDS (Continued)	
Medium Potency	
Preferred	Non-Preferred
fluticasone propionate cream (generic for Cutivate®)	Cloderm®
hydrocortisone butyrate (generic for Locoid®)	Cordran®
hydrocortisone valerate (generic for Westcort®)	Cutivate®
mometasone cream, ointment (generic for Elocon®)	Dermatop®
	Elocon®
	fluocinolone (generic for Synlar®)
	fluticasone lotion, ointment (generic for Cutivate®)
	Locoid®
	Luxiq®
	mometasone furoate solution (generic for Elocon®)
	Momexin®
	Pandel®
	prednicarbate (generic for Dermatop®)
	Synlar®
	Westcort®
High Potency	
Preferred	Non-Preferred
betamethasone valerate cream (generic for Valisone® Cream)	amcinonide (generic for Cyclocort®)
betamethasone valerate lotion (generic for Valisone® Lotion)	betamethasone dipropionate (generic for Diprosone®)
Beta-Val®	betamethasone dipropionate/propylene glycol (generic for Diprolene®)
fluocinonide cream (generic for Lidex® Cream)	betamethasone valerate foam (generic for Valisone® Foam)
fluocinonide gel (generic for Lidex® Gel)	betamethasone valerate ointment (generic for Valisone® Ointment)
fluocinonide solution (generic for Lidex® Solution)	desoximetasone (generic for Topicort®)
fluocinonide-E (generic for LidexE®)	diflorasone diacetate (generic for Florone®)
triamcinolone acetonide cream (generic for Kenalog® Cream)	Diprolene ®
triamcinolone acetonide ointment (generic for Kenalog® Ointment)	Diprolene AF®
	fluocinonide ointment (generic for Lidex® Ointment)
	Halog®
	Kenalog® aerosol
	Topicort®
	triamcinolone acetanide lotion (generic for Kenalog® Lotion)
	Vanos®
Very High Potency	
Preferred	Non-Preferred
clobetasol propionate cream, gel, oint, soln/emollient (generic for Temovate®)	Apexicon E®
halobetasol propionate (generic for Ultravate®)	clobetasol foam/lotion/shampoo (generic for Clobex®)
	Clobex®
	Halac®
	Halonate ®
	Halonate PAC®
	Olux ®
	Olux E®
	Temovate®
	Ultravate®
	Ultravate® X

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MISCELLANEOUS
ESTROGEN AGENT COMBINATIONS

Preferred	Non-Preferred
<u>Activella®</u> <u>Climara Pro®</u> <u>Combipatch®</u> <u>estradiol/norethindrone (generic for</u> <u>FemHRT®</u> <u>Prefest®</u> <u>Prempahse®</u> <u>Prempo®</u>	

ESTROGEN AGENTS ORAL/TRANSDERMAL
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Preferred	Non-Preferred
<u>Climara®</u> <u>Estrace®</u> <u>estradiol (generic for generic for Estrace®)</u> <u>estradiol patches (generic for for Climara®, Menostar®)</u> <u>estropipate (generic for for Ogen®)</u> <u>Ogen®</u>	<u>Alora®</u> <u>Cenestin®</u> <u>Divigel®</u> <u>Elestrin®</u> <u>Enjuvia®</u> <u>Estrasorb®</u> <u>Evamist®</u> <u>FemTrace®</u> <u>Menest®</u> <u>Menostar®</u> <u>Mini-Velle®</u> <u>Premarin®</u> <u>Vivelle-Dot®</u>

IMMUNOSUPPRESSANTS
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Preferred	Non-Preferred
<u>Azasan®</u> <u>azathioprine (generic for Imuran®)</u> <u>Cellcept®</u> <u>cyclosporine (generic for Gengraf®)</u> <u>Gengraf®</u> <u>Imuran®</u> <u>mycophenolate (generic for Cellcept®)</u> <u>Myfortic®</u> <u>Neoral®</u> <u>Prograf®</u> <u>Rapamune®</u> <u>Sandimmune®</u> <u>tacrolimus (generic for Prograf®)</u> <u>Zortress®</u>	

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**MISCELLANEOUS**

**OPIOID DEPENDENCE**  
**Clinical criteria apply**

Preferred	Non-Preferred
Suboxone® SL Film	buprenorphine (generic for Subutex®)
Suboxone® SL Tablet	buprenorphine/naloxone tablet (generic for Suboxone®)
	naltrexone (generic for ReVia®)
	Suboxone® SL Tablet
	Subutex®
	Vivitrol®

**INJECTABLE IMMUNOMODULATORS**

Preferred	Non-Preferred
Enbrel®	Amevive®
Humira®	Cimzia®
	Kineret®
	Orencia SQ®
	Simponi®
	Stelara®
	Xeljanz®

**SKELETAL MUSCLE RELAXANTS**

Preferred	Non-Preferred
baclofen (generic for Lioresal®)	Amrix®
chlorzoxazone (generic for Parafon Forte®)	carisoprodol (generic for Soma®)
cyclobenzaprine (generic for Flexeril®)	carisoprodol compound (generic for Soma Compound®)
methocarbamol (generic for Robaxin®)	cyclobenzaprine ER (generic for Amrix®)
tizanidine tablets (generic for Zanaflex® tablets)	Dantrium®
	dantrolene sodium (generic for Dantrium®)
	Fexmid®
	Lioresal intrathecal®
	Lorzone®
	metaxalone (generic for Skelaxin®)
	orphenadrine citrate (generic for Norflex®)
	orphenadrine compound/forte (generic for Norgesic/Forte®)
	Parafon Forte®
	Robaxin®
	Skelaxin®
	Soma®
	tizanidine capsules (generic for Zanaflex® capsules)
	Zanaflex®

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**DIABETIC SUPPLIES**

Roche Diagnostics Corporation is N.C. Medicaid's designated preferred manufacturer for glucose meters, diabetic test strips, control solutions, lancets, and lancing devices for Medicaid-primary recipients and Health Choice-primary recipients (dually eligible and third-party recipients are not affected). These products are covered under the Outpatient Pharmacy Program and can be submitted under the pharmacy point-of-sale system with a prescription.

Diabetic supplies can also be submitted under Durable Medical Equipment using the NDC and HCPCS code. For questions or assistance regarding diabetic supplies, please call the Division of Medical Assistance at 919-855-4310 (DME), 919-855-4300 (Pharmacy) or Roche Diagnostics Corporation at 1-877-906-8969.

Meters

Accu-Chek Aviva Plus Care Kit

Accu-Chek Compact Care Kit

Accu-Chek Nano SmartView Care Kit

Test Strips

Accu-Chek Aviva 50 ct Test Strip

Accu-Chek Aviva Plus 50 ct Test Strip

Accu-Chek SmartView 50 ct Test Strip

Accu-Chek Compact 51 ct Test Strip

Lancets

Accu-Chek Multiclix 102 ct Lancets

Accu-Chek Softclix 100 ct Lancets

Accu-Chek Fastclix 102 ct Lancets

Lancing Devices

Accu-Chek Softclix Lancing Device

Accu-Chek Multiclix Lancing Device

Accu-Chek Fastclix Lancing Device

Control Solutions

Accu-Chek Aviva Glucose Control Solution (2 levels)

Accu-Chek Compact Glucose Control Solution (2 levels)

Accu-Chek SmartView Glucose Control Solution (1 level)